## DECLARATION AND POWER OF ATTORNEY

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I am the below) o	original, first, and sole inverted the subject matter which i	entor (if only one name is listed s claimed and for which a pate	d below) or an original, first, and	as stated below next to my name. I believe d joint inventor (if plural names are listed titled A DATABASE SYSTEM AND on of which	
	[X is attached hereto		•		
	•		rial No. and was an	nended on(if applicable).	
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amendm 37 CFR listed bel	ent referred to above, and a 1.56(a). I hereby claim prid	cknowledge a duty to disclose prity benefits under 35 U.S.C. below any foreign application	information which is material to §119 based on any foreign applic	, including the claims, as amended by any the examination of this application under cation(s) for patent or inventor's certificate e on the present invention, filed before the	
	FOR	EIGN APPLICATION(S),	IF ANY, REFERRED TO A	BOVE	
	COUNTRY	APPLICATION NO.	DATE	PRIORITY CLAIMED	
	JAPAN	9-334905	November 19, 1997	YES X NO	
	JAPAN	9-334906	November 19, 1997	YES X NO	
				YES X NO  YES NO	
mer nati	onal filing date of this appli		IC DATE	OT A TY IS	
	SERIAL NUMBER	FILIN	IG DATE	STATUS	
				76; Robert R. Priddy, RN 20,169; Burton	
RN 24,5 Franklin	510; Martin Abramson, RN	25,787; George R. Pettit, RN : with full power of substitution	27,369; Louis Woo, RN 31,730;	d M. Belser, Jr., RN 22,956; Morris Liss, Elzbieta Chlopecka, RN 32,767; and Eric s application and to transact all business in	
			P.O. Box 19088, Washington, D	D. C. 20036-3425.	
statemer	nts' were made with the kno	wledge that willful false staten		and belief are believed to be true. These punishable by fine, imprisonment, or both, ereon.	
Note:	Please sign one full given name and your surname, using initials where appropriate for other names. It is important that the name be consistent throughout the application papers. Signing of an application more than five weeks prior to filing or an undated application is not acceptable to the Patent and Trademark Office except for receiving an initial filing date.				
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See	additional page for addition		ᄺᄱ		
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